

RECEIVED

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PUBLIC SERVICE  
COMMISSION

## **Madison County Utilities District**

P.O. Box 670 ♦ Richmond, Kentucky 40476

859-624-1735

October 25, 2007

Executive Director  
KY Public Service Commission  
PO Box 615  
Frankfort, KY 40602

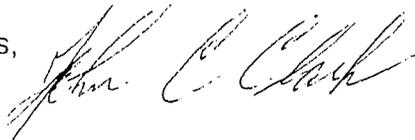
Office of the Attorney General  
Rate Intervention Division  
100 Perimeter Park  
Frankfort, KY 40602

**RE: Filing deficiencies of Case #2007-00454**

Pursuant to your letter regarding case # 2007-00454, the proposed non-recurring charges will not generate more than 5% of the general operating revenue. Should PSC staff require additional information, the District requests staff assistance in obtaining approval of these charges.

Please contact me if I can be of further assistance.

Very truly yours,



John Clark, Manager  
Madison County Utilities District

FOR Madison County  
Community, Town or City

P.S.C. KY. NO. \_\_\_\_\_

\_\_\_\_\_ SHEET NO. \_\_\_\_\_

Madison County Utilities District  
(Name of Utility)

CANCELLING P.S.C. KY. NO. \_\_\_\_\_

\_\_\_\_\_ SHEET NO. \_\_\_\_\_

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RATES

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Reconnect/After Hours	\$ 72.00
Reconnection/During Hours	\$ 38.00
Meter Reading Recheck	\$ 38.00
Service Charge	\$ 38.00
Returned Check	\$ 20.00

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DATE OF ISSUE October 16, 2007  
Month / Date / Year

DATE EFFECTIVE December 2, 2007

ISSUED BY   
(Signature of Officer)

TITLE Manager

BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION  
IN CASE NO. \_\_\_\_\_ DATED \_\_\_\_\_

FOR Madison County  
Community, Town or City

P.S.C. KY. NO. \_\_\_\_\_

\_\_\_\_\_ SHEET NO. \_\_\_\_\_

Madison County Utilities District  
(Name of Utility)

CANCELLING P.S.C. KY. NO. \_\_\_\_\_

\_\_\_\_\_ SHEET NO. \_\_\_\_\_

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RATES AND CHARGES

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Connection Fee 5/8 inch meter \$ 795.00

Connection Fee – Other size meters is actual cost.

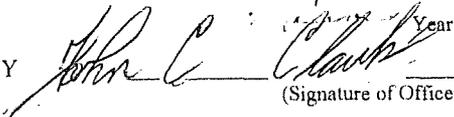
If the Utility encounters rock during the installation of a service, the customer shall be charged actual cost for said rock removal.

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ISSUED BY 

(Signature of Officer)

TITLE Manager

BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION

IN CASE NO. \_\_\_\_\_ DATED \_\_\_\_\_